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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Broome et al.

Examiner: Unknown

Serial No.: 09/723,003

Group Art Unit: 3731

Filed: November 27, 2000

Docket No.: 1001.1350102

For: DISTAL PROTECTION DEVICE AND METHOD

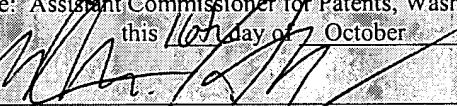
TRANSMITTAL SHEET

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

CERTIFICATE UNDER 37 C.F.R. 1.8: I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Assistant Commissioner for Patents, Washington, D.C. 20231, on

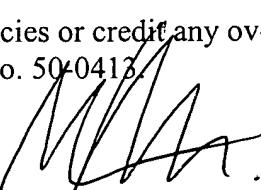
this 10th day of October, 2001.

By: 

Glenn M. Seager

We are transmitting herewith the attached:

- Request for Corrected Filing Receipt and copy of formal Filing Receipt.
- Postcard receipt.
- Please charge any deficiencies or credit any overpayment in the enclosed fees to Deposit Account No. 50-0413.

By: 

Glenn M. Seager, Reg. No. 36,926

CROMPTON, SEAGER & TUFTE, LLC
331 Second Avenue South
Suite 895
Minneapolis, Minnesota 55401-2246
Telephone: (612) 677-9050
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P A T E N T

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Broome et al.

Examiner: Unknown

Serial No.: 09/723,003

Group Art Unit: 3731

Filed: November 27, 2000

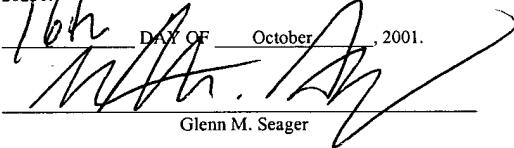
Docket No.: 1001.1350102

For: DISTAL PROTECTION DEVICE AND METHOD

REQUEST FOR CORRECTED FILING RECEIPT

Assistant Commissioner
for Patents
Washington, D.C. 20231

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS
BEING DEPOSITED WITH THE UNITED STATES
POSTAL SERVICE AS FIRST CLASS MAIL IN AN
ENVELOPE ADDRESSED TO: ASSISTANT
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20231.

16h DAY OF October, 2001.

Glenn M. Seager

Dear Sir:

Attached is a copy of the official Filing Receipt received with regard to the above application for which issuance of a corrected Filing Receipt is respectfully requested.

Applicant requests correction of the power of attorney, which has been incorrectly stated on the Filing Receipt. Applicant respectfully requests that the power of attorney be corrected as follows:

Glenn M. Seager
CROMPTON, SEAGER & TUFTE, LLC
331 Second Avenue South
Suite 895
Minneapolis, MN 55401

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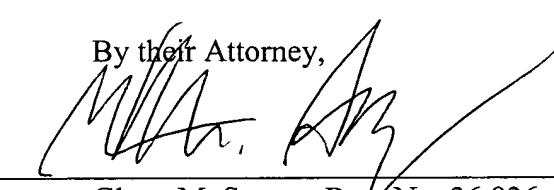
The requested correction is not due to any error by Applicant and no fee is due. Applicant respectfully requests correction of this error, and the issuance of a corrected Filing Receipt in due course.

Respectfully submitted,

THOMAS E. BROOME, ET AL.

By their Attorney,

Date: Oct. 16, 2001


Glenn M. Seager, Reg. No. 36,926
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MAY 29 2001

UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
 UNITED STATES PATENT AND TRADEMARK OFFICE
 WASHINGTON, D.C. 20231
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET.NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/723,003	11/27/2000	3731	808	1001.1350102	12	20	4

CONFIRMATION NO. 4872

FILING RECEIPT

Joseph R. Kelly
 c/o WESTMAN, CHAMPLIN & KELLY, P.A. GLENN M. SEAGER
 Suite 1600 - International Centre CROMPTON, SEAGER & TUFT, LLC
 900 Second Avenue South 331 SECOND AVENUE SOUTH
 Minneapolis, MN 55402-3319 SUITE 895
 MINNEAPOLIS, MN 55401

Date Mailed: 05/21/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Thomas E. Broome, Hopkins, MN;
 John M.K. Daniel, Plymouth, MN;
 Thomas R. Hektner, Medina, MN;

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Domestic Priority data as claimed by applicant

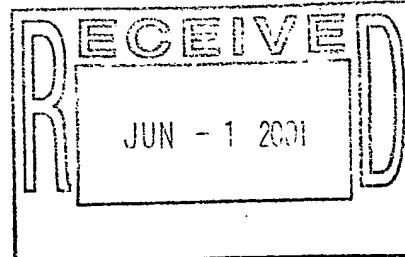
Foreign Applications

If Required, Foreign Filing License Granted 04/05/2001

Projected Publication Date: N/A

Non-Publication Request: No

Early Publication Request: No



Title

Distal protection device and method

Preliminary Class

606

Data entry by : VORACHACK, CHUNTASORN Team : OIPE

Date: 05/21/2001

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Title 37, Code of Federal Regulations, 5.11 & 5.15**

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PLEASE NOTE the following information about the Filing Receipt:

- The articles such as "a," "an" and "the" are not included as the first words in the title of an application. They are considered to be unnecessary to the understanding of the title.
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- The title may be truncated if it consists of more than 500 characters (letters and spaces combined).
- The docket number allows a maximum of 25 characters.
- If your application was submitted under 37 CFR 1.10, your filing date should be the "date in" found on the Express Mail label. If there is a discrepancy, you should submit a request for a corrected Filing Receipt along with a copy of the Express Mail label showing the "date in."
- The title is recorded in sentence case.

Any corrections that may need to be done to your Filing Receipt should be directed to:

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Customer Service Center
Washington, DC 20231

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Bib Data Sheet

CONFIRMATION NO. 4872

SERIAL NUMBER 09/723,003	FILING DATE 11/27/2000 RULE	CLASS 606	GROUP ART UNIT 3731	ATTORNEY DOCKET NO. 1001.1350102
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APPLICANTS

Thomas E. Broome, Hopkins, MN;
 John M.K. Daniel, Plymouth, MN;
 Thomas R. Hektner, Medina, MN;

**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 04/05/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 12	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

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 Minneapolis , MN 55401

TITLE

Distal protection device and method

FILING FEE RECEIVED 808	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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